

JUN 09 2005

PTO/SB/21 (03-03)

Approved for use through 04/30/2003 OMB 0851-0031

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<b>TRANSMITTAL FORM</b>  <small>(to be used for all correspondence after initial filing)</small>	Application Number	10/813,518	
	Filing Date	03/30/2004	
	First Named Inventor	Santa Cruz, Michael	
	Art Unit	3811	
	Examiner Name	Silbermann, Joanne	
Total Number of Pages in This Submission	6	Attorney Docket Number	256.100

ENCLOSURES (Check all that apply)		
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Remarks  Form SB 21 Transmittal = 1 page Amendment & Reply = 5 pages		

## SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual	Michael A. Shippey
Signature	<i>Michael A. Shippey</i>
Date	06/09/2005

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**MICHAEL SHIPPEY, PH.D**  
**TECHNICAL CONSULTANT & PATENT AGENT**



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*Law Offices of*  
**KARLA SHIPPEY**  
4848 Lakeview Avenue, Suite B  
Yorba Linda, CA 92886-3452

*Toll Free:* (800) 693-9110  
*Telephone:* (714) 693-9110  
*Facsimile:* (714) 693-7980

Filed Via RightFax to: (703) 872-9302

June 9, 2005

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Date: Thursday, June 09, 2005      Application No.: 10/813,518      Filed: 03/30/2004  
Examiner Joanne Silberman      Art Unit 3611      Office Action dated 03/09/2005  
In re the Application of: Michael Santa Cruz      For: **HAND GESTURE RECEIVER**  
Attorney Docket number: 256.100

**REPLY AND AMENDMENT**

Commissioner for Patents  
Alexandria, VA 22313-1450

Sir:

Please amend this application, in the claims, as set forth on the following pages, and consider the remarks extended on behalf of the instant application. The claims are amended to conform to current amendment practice.

Respectfully yours,

*Michael A. Shippey*  
Michael A. Shippey

Registration No.: 45,588

Customer code: 030040